

## CLAIMS ONLY

4-16-10

Application Number

10-589257

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* Indep	* Depend	* Indep	* Depend	* Indep	* Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
1	I						51					
2		I					52					
3		I					53					
4		I					54					
5	I						55					
6							56					
7							57					
8		I					58					
9	I						59					
10			I				60					
11		I					61					
12		I					62					
13		I					63					
14		I					64					
15	I						65					
16							66					
17	I						67					
18		I					68					
19		I					69					
20	I						70					
21	I						71					
22							72					
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42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	16						Total Indep					
Total Depend	12						Total Depend					
Total Claims	18						Total Claims					